## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**CLAIMS AS FILED - PART I** 

Application or Docket Number

60033-0011

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			4				ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	Ì	BASIC FEE		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		* 0		İ	X\$ 9=	8	OR	X\$18=		
INDEPENDENT CLAIMS			# minus 3 =		. 1		Ì	X42=	42	OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				Ì	+140=	A	OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL	42.	OR	TOTAL		
	С	LAIMS AS A	MENDED	- PAR	- PART II						OTHER THAN		
		(Column 1) CLAIMS		(Column 2) HIGHEST		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	ĺ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	F CL AIM	=		X42=	-	OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-	
	Ind pendent	* NTATION OF MU	Minus	***	CLAIM	=	Ī	X42≃		OR	X84=		
	THOTTHEOL	INTATION OF WE	CHELL DEF	LINDEINI	CLAIIVI			+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
	p - Commission of a sep - 1 - Marketon agreement	(Column 1)		(Colur		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CLAIM			X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +										OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE										<b>I</b>	TOTAL		
***	If the "Highest Nu	mber Previously Pa hber Previously Pai	aid For" IN THIS	S SPACE i	s less tha	n 3, enter "3."		DDIT. FEE	roprioto b	,	ADDIT. FEE		
	o ingriest Hull	iodi i reviousiy Fal	u For (Total of	muepenu	eng is me	mgnest number	ioun	ы ш ше арр	торпате вох	in col	umn 1.		